

**RHODE ISLAND DEPARTMENT OF TRANSPORTATION
MATERIALS AND QUALITY ASSURANCE
NUCLEAR DENSITY TEST OF SOILS REPORT**

Item No: _____	Date: _____
RI Contract No: _____	F.A.P. No: _____
Project: _____	Location: _____
Gauge No: _____	Daily Std: Density _____ Moisture: _____

Acceptance

Independent

Info Only

Soil Description:	Lab No:
A Theoretical Max Dry Density (lb/ft ³): <small>Corrected for oversize, AMDD from Proctor Test T-180</small>	Opt. Moisture (%): <small>From Proctor Test T-180</small>

Section (Lot) Details / Notes:

B Section Begin (station):	Section End (station):
B Total Length of Section (ft):	C Average Width of Section (ft):
D Approx. Area of Section (ft ²): <small>[B x C]</small>	E Approx. Area of section(yd ²): <small>[D/9]</small>
Approx. Lift Thickness:	F No. of Lifts Represented:
G Minimum No. of tests: <small>[F x [(E/1000)+1]]</small>	H Sublot Length (ft): <small>[B/G]</small>

	Test Number	1	2	3	4
I	Sublot Begin (station):				
J	Random #1 (0.0001-1.0000):				
K	Random Length: <small>[H x J]</small>				
L	Random Station: <small>[I+K]</small>				
M	Width @ Location L:				
N	Random #2 (0.0001-1.0000):				
P	Random Offset: <small>[N x M]</small>				
	Offset: feet Rt. / Lt. of Center				
	Elevation:				
	Probe Depth (in):				
	Field Moisture Content (%):				
	Field Nuclear Wet Density (lb/ft ³):				
Q	Field Nuclear Dry Density (lb/ft ³):				
R	% Theoretical Max Dry Density: <small>[(Q/A) x 100]</small>				
	Specification:				

Meets Spec

Does Not Meet Spec

Not Applicable

Remarks: _____

Technician _____ (Print / Sign) Date _____
ID# TF2 - 301

Reviewed By _____ (Print / Sign) Date _____
REV. 4/25/16